



Compliance Procedures

1. LEGISLATION/ENTERPRISE AGREEMENT/POLICY SUPPORTED

[Compliance Policy](#)

2. PROCEDURAL DETAILS

2.1. Responsibilities

Entity/Officer	Responsibilities
Executive Managers	<ul style="list-style-type: none"> (a) leading by example and demonstrating their active commitment to, and support for, the <u>compliance culture</u>, performance targets, and policy and procedures; (b) supporting the Compliance Officers who operate in their portfolio; (c) implementing necessary systems and process (including the relevant compliance management plans) within their area of responsibility to assist the University in meeting its <u>compliance obligations</u>; (d) allocating adequate resources to implement, maintain and improve an effective <u>compliance</u> regime within their area; (e) investigating and remedying actual or potential compliance breaches; (f) considering and endorsing compliance management plans within their portfolio, prior to submission to Audit, Risk and Compliance Committee; and (g) monitoring the compliance performance of their staff, including attendance at required training, and implementing corrective actions in the event of a breach which is escalated to them.
Senior managers (e.g., Heads of School/ Area/ Organisational Area)	<ul style="list-style-type: none"> (a) demonstrating their active commitment to, and support for, the compliance culture, performance targets, and policy and procedures; (b) working collaboratively with Compliance Officers, and Compliance Services; (c) ensuring that staff, students, guests, University Associates and contractors in their school/area are appropriately aware of their compliance obligations; (d) demonstrating, through their own actions and behaviour, that the University takes its compliance obligations seriously and that appropriate action will be taken to correct compliance breaches; (e) implementing controls, systems and processes, and taking any other necessary measures, to ensure that students and staff behave in accordance with relevant compliance obligations and to minimise the likelihood of compliance breaches occurring; (f) investigating and remedying actual or potential compliance breaches; (g) monitoring the meeting of compliance obligations and risk management strategies within their area of responsibility, and reporting breaches and incidents as required (see section 2.6); (h) specifying significant compliance responsibilities in position descriptions and work plan and performance review processes for those staff required to implement, oversee and comply with compliance risk management controls and strategies; and (i) including in their area's operational risk planning the compliance obligations for which their area has responsibility.

<p>Director Compliance Services, and supported by the Compliance Consultant</p>	<ul style="list-style-type: none"> (a) implementing, monitoring and measuring the effectiveness of the <i>Compliance Policy</i> and <i>Compliance Procedures</i> and the continuous improvement of the compliance framework; (b) monitoring and updating the Curtin Compliance Plan (see section 2.5), <i>Compliance Policy</i> and <i>Compliance Procedures</i>, and associated resources supporting the Compliance Framework; (c) keeping abreast of new or changed legislation relevant to the University's activities, and informing appropriate areas of the University of these legislative developments; (d) maintaining the Register of Compliance Obligations, which contains information on selected legal obligations (including laws, regulations and industry codes) which carry a high risk rating or which impinge directly on the University's core activities; (e) conducting education campaigns to increase awareness of the legislative context in which Curtin operates, to provide information on the components of Curtin's compliance framework, and to foster a strong compliance culture; (f) providing guidance and support to Compliance Officers to assist their development and implementation of effective compliance programs relating to the obligation for which they are accountable; (g) confirming that Compliance Officers are adequately recording compliance breaches, that remedial action has been taken, that the incident and resolution has been reported to the appropriate authority, and that the Vice-Chancellor and Council have been provided with recommendations in relation to trends and systemic issues; (h) providing guidance and support to Heads of School/Areas, or other managerial staff, to assist their introduction and management of effective compliance practices in their area of authority; (i) working closely with staff involved in policy development to ensure that Curtin's statutory obligations are reflected in its internal policies and procedures; (j) preparing reports to the Audit, Risk and Compliance Committee and senior management to inform them of noteworthy compliance issues, any <u>significant breaches</u> and remedial action taken, and proposed improvements to the compliance program to more closely align it with best practice as defined by ISO19600:2014 Compliance Management Systems Guidelines; (k) actively managing the Compliance Forum (a forum for Compliance Officers and key contact officers within school/areas to discuss significant compliance issues); and (l) working with other relevant areas to promote a positive compliance culture by incorporating compliance issues in the University's wider management practices and operational systems.
<p>Compliance Officers</p>	<ul style="list-style-type: none"> (a) establishing, implementing, monitoring and measuring the effectiveness of a university-wide compliance program in relation to their assigned compliance obligations. (b) analysing and recommending improvements to the compliance program (c) preparing and maintaining a compliance management plan and annual report against the plan for each piece of Category A legislation. The plan will: <ul style="list-style-type: none"> (i) provide a compliance risk assessment; (ii) identify the appropriate <u>compliance approach</u>, compliance performance indicators and where, required compliance risk treatment; (iii) identify appropriate communication and training requirements; and

	<ul style="list-style-type: none"> (iv) identify and manage the establishment and maintenance of necessary systems, controls and procedures to support the plan; (v) provide reports to the Director, Compliance Services to assist in the reporting of the effectiveness of the compliance framework to the Council, Council subcommittee and the Vice-Chancellor and executive management, as required. (d) establishing and maintaining a documented plan to implement and monitor compliance actions with Category B compliance obligations; (e) monitoring <u>compliance breaches</u> or areas of shortfall in achieving compliance, and working with the relevant managers, where appropriate, to facilitate effective remedial action; (f) providing reports of compliance breaches and ensuring that these are reported in a timely manner to the relevant authority required pursuant to the applicable legislation; (g) liaise with relevant regulatory or external authorities as required; and (h) maintain relevant compliance records and documentation.
Deputy Compliance Officers	<ul style="list-style-type: none"> (a) assisting the Compliance Officer with their responsibilities and acting under their direction; and (b) Deputy Compliance Officers will normally be appointed to work within their functional work area.
All staff	<ul style="list-style-type: none"> (a) ensuring that their activities on behalf of the University comply with all laws, regulations, and University codes, policies and procedures; (b) maintaining an up-to-date knowledge of legislation and University policies and procedures concerning compliance requirements that affect their activities and relationships at work, and undertake training and compliance assessments as required; (c) reporting potential and actual compliance breaches, risks, hazards, incidents and complaints to their manager or as provided under specific legislation; and (d) referring to the relevant University policies, procedures or both before acting, and seeking advice if they are uncertain as to what constitutes acceptable behaviour in a given situation.

2.2 Assessment of compliance obligations and appropriate compliance approach

- 2.2.1 An assessment of the appropriate compliance approach will be undertaken by Compliance Services, in conjunction with subject matter experts, for Commonwealth and WA State legislation that:
- (a) applies to the University; and
 - (b) for which the University meets any applicable threshold criteria in the legislation.
- 2.2.2 The assessment criteria include consideration of: strategic importance, operational significance, the University's risk appetite, risk assessment of consequences, likelihood of non-compliance, and statutory reporting requirements.
- 2.2.3 As a result of the assessment, each compliance obligation will be assigned to a category and compliance approach. The Director, Compliance Services will recommend this assignment to the Vice-Chancellor, who will consider and may approve the assignment. The categories are:
- (a) **Category A:** Key legislation and University policies and procedures associated with that legislation;
 - (b) **Category B:** The University's statutes, rules, by-laws, and policies and procedures not included in Category A; or
 - (c) **Category C:** Other legislation, statutes, rules, by laws and policies and procedures not included in Categories A or B.
- 2.2.4 If assessed as having the potential for significant impact on the University's operations and strategic objectives, legislation in foreign jurisdictions in which the University operates will be assessed and managed similarly to domestic legislation.

- 2.2.5 Statutes, rules, by-laws and policies and procedures will be assessed to determine if there is a gap, strategic or operational need for a statute, rule, by-law, policy or procedure.
- 2.2.6 If it is determined that a statute, rule, by-law, policy or procedure is required an assessment of the appropriate compliance approach will be undertaken as part of the process of developing the instrument.
- 2.2.7 If it is determined that a policy is required an assessment of the appropriate compliance approach will be undertaken as part of the process of developing the policy and any related procedures.
- 2.2.8 The category assignment and compliance approach will be reassessed as organisational needs and compliance maturity changes, or on request. Any compliance form or process may be used to support the compliance approach at any level provided it is appropriate to meet the risk based approach to managing compliance.
- 2.2.9 [Schedule A \(Compliance Approach\)](#) shows the categories, compliance instruments and compliance treatments that may apply.

2.3 New or changed legislation

- 2.3.1 Compliance Services will keep abreast of new or changed legislation relevant to Curtin's activities, and will inform appropriate areas of the University of these legislative developments.
- 2.3.2 If staff become aware of new or changed legislation relevant to Curtin's activities, they will inform Compliance Services.

2.4 Appointment of Compliance Officers and Deputy Compliance Officers

- 2.4.1 A Compliance Officer will be appointed for each Category A compliance obligation by an Executive Manager or the Vice-Chancellor, on the recommendation of the Director, Compliance Services. This appointment does not diminish the responsibility of individuals in acting in compliance with their obligations.
- 2.4.2 The Planning and Management Committee and the Audit, Risk and Compliance Committee will be informed of any changes in the appointment of Compliance Officers as part of the regular reporting to those committees.
- 2.4.3 A Compliance Officer or Executive Manager may appoint one or more Deputy Compliance Officers to assist in managing compliance. Deputy Compliance Officers will normally be appointed to work within their functional work area.

2.5 Compliance plans

2.5.1 Curtin Compliance Plan

The Director, Compliance Services will maintain the Curtin Compliance Plan. The Plan includes activities to support the compliance framework, including supporting Compliance Officers and other staff through the development of information sharing, induction, training and reporting. The Plan will outline the management of the Compliance Framework through the submission of the compliance management plans and annual return.

2.5.2 Compliance Management Plans

2.5.2.1 Compliance Officers will produce a Compliance Management Plan for each Category A compliance obligation. This plan will be updated and submitted to Compliance Services annually.

2.5.2.2 New and changed Compliance Management Plans and any relevant supporting documents will be considered by the Compliance Officer's Executive Manager prior to submission to Compliance Services. The Executive Manager may endorse the submission of the plan unconditionally or subject to conditions.

2.5.3 Annual Returns

Compliance Officers will provide to Compliance Services an Annual Return against the relevant Compliance Management Plan. The Annual Return will be endorsed by the Compliance Officer's Executive Manager prior to submission.

2.5.4 Annual Compliance Management Assessment

For Category B compliance instruments the Compliance Officer will complete an Annual Compliance Management Assessment and will submit this to Compliance Services for review.

2.6 Reporting of potential compliance breaches

- 2.6.1 All significant breaches, and Category A and B non-compliance incidents, will be reported through the University's complaints portal, accessible from the [University's website home page](#). Category C non-compliance incidents may be reported through the portal or directly to the relevant manager.
- 2.6.2 The administrator of the complaints portal will ensure the relevant manager receives the notification and the relevant Compliance Officer is informed.
- 2.6.3 Notification of breaches will be escalated in accordance with the Incident Alert Matrix.
- 2.6.4 The accountable officer for an activity or process that identifies a compliance breach incident (e.g. an audit) will notify the relevant Compliance Officer of a significant breach within the specified time (see table below).

Category	Nature of the breach	Notify within
Category A Key legislation and University policies and procedures associated with that legislation	Significant	1 day
	Non-compliance incident	10 days
Category B The University's statutes, rules, by-laws, and policies and procedures not included in Category A	Significant	1 day
	Non-compliance incident	10 days
Category C Other legislation and procedures	Significant	1 day
	Non-compliance incident	10 days

2.7 Management and resolution of compliance breaches

- 2.7.1 The process of managing and resolving the non-compliance will be as prescribed by the relevant compliance authority which may include relevant foreign, Commonwealth and Western Australian laws, regulations, industry codes and University statutes, rules, by-laws, policies and procedures. The relevant manager is responsible for the resolution of the breach. The Compliance Officer can provide advice to the manager in relation to the compliance obligation.
- 2.7.2 The Compliance Officer will monitor and analyse compliance breaches to determine if there are any trends or systemic issues, and will implement a response or recommend appropriate action to the relevant manager.
- 2.7.3 The Compliance Officer will provide regular reports of compliance breaches and action taken with respect to them to Compliance Services.
- 2.7.4 Compliance Services may initiate random checks to monitor compliance with compliance obligations or conduct its own enquiries into compliance breaches.
- 2.7.5 Compliance Services will provide reports to relevant committees on any improvements to the compliance framework that have been identified as a result of compliance breaches and will facilitate learning and improved practices within the Compliance Officers group and, where applicable, the University community.

2.8 Assurance reporting

2.8.1 Council

- 2.8.1.1 Compliance Services will provide to Council an annual report on the Compliance Framework. Regular reports will be provided to the Audit, Risk and Compliance Committee on the Compliance Framework and significant breaches, trends, systemic issues and relevant matters.

2.8.1.2 Council and its committees may also receive reports from areas responsible for managing compliance.

2.8.2 Vice-Chancellor

2.8.2.1 Compliance Services will provide reports to the Vice-Chancellor, usually through the Planning and Management Committee. The reports will provide an update on the Curtin Compliance Plan, significant breaches, trends, systemic issues and other relevant matters, and may make recommendations in regard to compliance issues.

2.8.2.2 The Vice-Chancellor may also receive reports from areas responsible for managing compliance.

2.8.3 Annual Certification

An Annual Certification will be completed by the Executive and Heads of Organisational Areas. A report on each Annual Certification will be provided to the Audit, Risk and Compliance Committee and to the Vice-Chancellor.

2.9 Continuous improvement

2.9.1 The *Compliance Policy, Procedures* and supporting documents will be monitored and reviewed on a regular basis and in accordance with the University's Policy Framework.

2.9.2 Compliance Services will use the information from the annual reviews of the Compliance Management Plans and the Curtin Compliance Plan to identify and recommend a plan of action to improve compliance awareness, performance and culture.

3. RESPONSIBILITIES

Responsibilities are those as set out in section 2.

4. SCOPE OF PROCEDURES

Council members, all students and all staff.

5. DEFINITIONS

(Note: Commonly defined terms are located in the [Curtin Common Definitions](#). Any defined terms below are specific to this document)

Compliance

Adhering to the requirements of the University's policies and procedures, laws, industry and organisational standards and codes, principles of good governance and accepted community and ethical standards (including the ISO19600:2014 Compliance Management Systems Guidelines) in the context of the University's risk appetite.

Compliance approach

The activities undertaken by the University in managing the risk of non-compliance with an obligation with which the University must comply. Activities include awareness-raising and education, development and monitoring of training, developing and monitoring of the Compliance Management Plan, assessment of the Annual Return, and the assessment and resolving of breaches.

Compliance breach or failure

An act or omission whereby the University has not met its compliance obligations, processes or behavioural obligations.

Compliance culture

Values, ethics and beliefs that exist throughout an organisation and interact with the organisation's structures and control systems to produce behaviour norms that are conducive to compliance outcomes. (source: ISO 19600:2014)

Compliance obligations

The relevant Commonwealth and Western Australian laws, regulations, industry codes and University statutes, rules, by-laws, policies and procedures.

Compliance treatment

A risk treatment process to reduce the compliance risk of an event occurring to an acceptable level to the organisation.

Significant breach

A breach will be significant if:

- it approaches or exceeds the University's risk appetite;
- it adversely affects the University meeting any of its TEQSA obligations; or
- the cumulative effect of multiple, similar breaches is material.

6. SCHEDULES

[Schedule A: Compliance Approach](#)

7. RELATED DOCUMENTS/LINKS

[ISO19600:2014 Compliance Management Systems Guidelines](#)

Compliance Handbook (forthcoming)

[Policy Framework Policy](#)

[Policy Framework Procedures](#)

[Voluntary Code of Best Practice for the Governance of Australian Universities](#)

[Curtin Corporate Governance Framework](#)

[Corporate Governance Statement](#)

Incident Alert Matrix

Policy Compliance Officer	Naomi Yellowlees , Director, Compliance Services
Policy Manager	Chief Operating Officer
Approval Authority	Vice-Chancellor
Review Date	1 st April 2016

REVISION HISTORY

Version	Approved/ Amended/ Rescinded	Date	Committee / Board / Executive Manager	Approval / Resolution Number	Key Changes and Notes
New	Approved	20/02/2013	Vice-Chancellor	EM1303	Unconditional approval, effective 27 February 2013
	Administratively Updated	03/05/2013	Director, Legal and Compliance Services		Compliance and Copyright Consultant title changed
	Administratively Updated	11/02/2015	Director, Legal and Compliance Services		Standards Updated
	Administratively Updated	18/08/2015	Director, Legal and Compliance Services		Links Updated
	Administratively Updated	06/10/2015	Director, Legal and Compliance Services	EC 76/15	Executive Manager Title Changes
	Administratively Updated	17/11/2017	Director, Legal and Compliance Services		Minor text amendments

SCHEDULE A: COMPLIANCE APPROACH

Compliance Category	Description	Compliance Officer accountability	Deputy Compliance Officers	Compliance management	Reporting: Significant breaches	Reporting: Non-compliance incidents	Trends/systemic issues	Assurance activities
A	Key legislation and University policies and procedures associated with that legislation.	Designated Compliance Officer to: provide breach reports; produce, update and manage the implementation of a compliance management plan; and provide annual report of actions against planned compliance management actions and issues arising.	Depending on the scope of the compliance activity, Deputy Compliance Officers may be appointed.	Active management plan required. This may be through a compliance management plan, operational plan, risk assessment plan, or other such mechanism.	Reported through the complaints portal within 1 working day.	Reported through the complaints portal within 10 working days.	Analysis managed by Compliance Officer and reported to Compliance Services twice yearly or earlier as required.	A range of activities that may include as appropriate Annual Certification, Internal Audit plan, external audit, or internal self-assessment.
B	The University's statutes, rules, by-laws, and policies and procedures not included in Category A.	There is a designated Compliance Officer.	Depending on the scope of the compliance activity, Deputy Compliance Officers may be appointed.	Active management plan required. This may be through a compliance self-assessment process completed by the Compliance Officer, compliance management plan, operational plan, risk assessment plan, or other such mechanism.	Reported through the complaints portal within 1 working day.	Reported through the complaints portal within 10 working days.	Analysis managed by Designated Officer/ Policy Contact and reported to Compliance Services yearly or otherwise as required if significant issue (note: if policy/procedure relates to Key Legislation this is covered in the activities of Category A matters).	May be included in Annual Certification, Internal Audit plan, external audit, or internal self-assessment.
C	Other legislation, Statutes, by-laws policies, and procedures not included in Categories A or B.	No appointed Compliance Officer but there may be an officer within the University with operational expertise of activity and/or key operational responsibility.	No Deputy Compliance Officer but there may be a range of other officers who manage compliance.	May be part of an operational plan, work rules, or work performance management. Often embedded in activities.	Reported through the complaints portal within 1 working day.	Reported through the complaints portal or to the relevant manager within 10 working days.	By exception, managed by Compliance Services or area expert as appropriate.	May be embedded in operational work practices and managed at local area.